



Please type a plus sign (+) inside this box → ☐

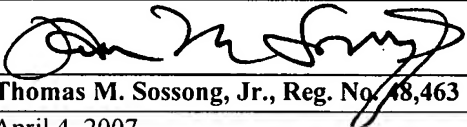
PTO/SB/21

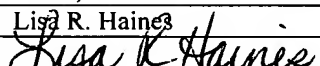
OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/634,108
		Filing Date	August 4, 2003
		First Named Inventor	Volkhard Lindner, et al.
		Group Art Unit	1644
		Examiner Name	Maher M. Haddad
Total Number of Pages in This Submission		Attorney Docket Number	53689-5006-02

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) – Figs. <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> - Supplemental Declaration - Request to Amend Inventorship - Return Postcard
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Name	Drinker Biddle & Reath LLP
Signature	
Printed Name	Thomas M. Sossong, Jr., Reg. No. 48,463
Date	April 4, 2007

CERTIFICATE OF MAILING UNDER 37 CFR 1.8	
I hereby certify that this paper, along with any documents referred to as being enclosed therewith, is being deposited with the United States Postal Service in an envelope addressed to U.S. Patent Office, Assistant Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:.	
Typed or printed name	Lisa R. Haines
Signature	
Date: April 4, 2007	